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Bib Data Sheet

CONFIRMATION NO. 5228

SERIAL NUMBER 10/090,370	FILING DATE 03/04/2002 RULE	CLASS 370	GROUP ART UNIT 2665	ATTORNEY DOCKET NO. 1217.P012US
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** CONTINUING DATA NO / DH *****

** FOREIGN APPLICATIONS NO / DH *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 04/08/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 4
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Verified and Acknowledged
 Examiner's Signature DH Initials

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TITLE
 CDMA system with frequency domain equalization

FILING FEE RECEIVED 702	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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